PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE

maintenance fee notification	S.	m block i, by (a) specifying	ification of maintenance fees a new correspondence address	uired). Blocks I through 5 s will be mailed to the current s; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENC 34492 75	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
SIDLEY AUSTIN 555 W. FIFTH ST., LOS ANGELES, C 09/30/2005 HDESTA2 0000007		P GROUP	I hereby certify that to States Postal Service addressed to the Ma transmitted to the US	Certificate of Mailing or Transmission eby certify that this Fee(s) Transmittal is being deposited with the United s Postal Service with sufficient postage for first class mail in an envelope ssed to the Mail Stop ISSUE FEE address above, or being facsimile mitted to the USPTO (703) 746-4000, on the date indicated below.			
01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA 03 FC:8001 30.00 DA		SEP 2	9 2005 [§] ,&/	Melody Septem	K. Gutier 11 St. ber 26, 2005	(Signature)	
APPLICATION NO.	FILING DATE	MADE	ERISON AME	D INVENTOR			
09/827,481	04/06/2001	, DET		Russell	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
TITLE OF INVENTION: SY	STEM AND PROCESS FO	OR DELIVERY O		•	041892.0206	5741	
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	09/28/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
BAROT, BHARAT		2155		709-219000	-		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below to essignee.			listed, no name will be printed.				
(A) NAME OF ASSIGNED Movielink,	E LLC	(B	RESIDENC 2120 Co Santa M	E:(CITY and STATE OR COI Dlorado Avenue, Monica, Californ	_{UNTRY)} 4th Floor ia 90404		
4a. The following fee(s) are en	solghee eategory or eategor			atent): Individual Co	orporation or other private gro	oup entity Government	
Issue Fee			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies10			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $\underline{-50-1597}$ (enclose an extra copy of this form).				
5. Change in Entity Status (f			_	ant is no longer claiming SMAI			
The Director of the USPTO is NOTE: The Issue Fee and Pub interest as shown by the record	requested to apply the Issue lication Fee (if required) wi ls of the United States Pater	Fee and Publicat	ion Fee (if an	y) or to re-apply any previously other than the applicant; a regi	y paid issue fee to the applications stered attorney or agent; or the	tion identified above. e assignee or other party in	
Authorized Signature				Date 9-26-2005			
Typed or printed name	Spyros J. Laz	aris		Registration	No. 54,550		
This collection of information an application. Confidentiality submitting the completed appl this form and/or suggestions for Box 1450, Alexandria, Virgini Alexandria, Virginia 22313-14 Under the Paperwork Reductio	or reducing this burden, sho a 22313-1450. DO NOT SI 50.	uld be sent to the END FEES OR C	Chief Inform OMPLETED	o obtain or retain a benefit by the	ne public which is to file (and ninutes to complete, including mments on the amount of tin Trademark Office, U.S. Depa . SEND TO: Commissioner f	rtment of Commerce, P.O. or Patents, P.O. Box 1450,	